REMARKS

By this paper, new Claims 14 and 15 have been added. Support for new Claims 14 and 15 can be found at least in pages 10-14 and Figures 3a and 3b of the specification as filed. Applicant respectfully submits that no new matter has been added by this amendment. Thus, Claims 1-15 are pending and presented for examination.

Discussion of Rejection of Claims 1-13 Under 35 U.S.C. 103(a)

The Examiner has rejected Claims 1-13 as unpatentable over U.S. Patent Application No. 2002/0004729 by Zak in view of U.S. Patent No. 6,324,516 to Shults, et al. In rejecting Claim 1, the Examiner conceded that Zak does not disclose "a compliance audit component in communication with the medical emergency database, wherein the compliance audit component is configured to: check to ensure that data in the medical emergency database for a current encounter is consistent with a high risk compliance area, and prompt for correction of the data where the data is not consistent." The Examiner then stated:

> However, these features are well known in the art as evidenced by Shults. In particular, Shults teaches a system that audits medical bills for compliance with state, PPO and provider rules (Shults; Col. 3, lines 57-60). Shults further teaches checking to ensure that an item on the medical is authorized by the UR agreement. Examiner submits that these features of Shults read upon checking to ensure that data in the database is consistent with a high risk compliance area. Shults further teaches flagging a line for further review if an item is not authorized (Shults; Col. 4, lines 17-18). Examiner submits that "flagging a line" reads upon "prompting for correction." One of ordinary skill in the art would add these features from Shults to Zak with the motication of providing a complete medical bill processing system that can check the entire bill against applicable rules (Shults; Col. 2, lines 39-42).

The Examiner also rejected independent Claims 9 and 12 as repeating the limitations of Claim 1.

For the reasons set forth below, Applicant respectfully submits that Claims 1, 9, and 12 are patentable over the combination of Zak and Shults, both because neither Zak nor Shults teach certain limitations of the independent claims, and because there would be no reason to combine the teachings of Zak with those of Shults.

Zak is directed to a simplified handheld system for recording medical data at an accident scene. As noted by the Examiner, Zak does not contain a compliance audit component as claimed.

Shults is directed to a system in which a payor, such as an insurance company, reviews an itemized bill to determine whether the items should be flagged for payment or should be flagged for manual review to determine whether payment is appropriate. The bill is repriced to contain the lowest quantity of service, at the lowest point authorized by the restraints of state, PPO, and provider rules. *See Shults*, col. 6, ll. 29-33. The provider rules include preexisting arrangements, referred to as UR agreements, between the payor and the treatment provider, in which the provider has diagnosed an injuty, determined what treatment is needed, and called the payor to obtain authorization to perform that treatment under agreed-upon payment terms. *See Shults*, col. 1, ll. 55-67. Because the itemized bill provided to the payor may be itemized in a manner which does not correspond to the itemization of the original UR agreement, Shults teaches methods for correlating itemized costs in the bill with itemized costs in the UR agreement. *See Shults*, col. 6, ll. 20-23.

Applicant respectfully submits that even if the two systems were to be combined as set forth by the Examiner, neither system teaches or suggests all of the claimed elements. Claim 1 recites a computerized, integrated emergency medical transportation database system comprising, *inter alia*, a compliance audit component in communication with the medical emergency database, wherein the compliance audit component is configured to check to ensure that data in the medical emergency database for a current encounter is consistent with a high risk compliance area, and prompt for correction of data where the data is not consistent.

Applicant respectfully submits that neither Zak nor Shults check to ensure that data in the medical emergency database for a current encounter is consistent with a high risk compliance area, and prompt for correction of the data where the data is not consistent. The Examiner has already conceded this with respect to Zak. Shults teaches a review of a billing database and a UR database to determine whether a billed item is authorized by a UR agreement, and the flagging of an unauthorized payment for manual review.

The Examiner has asserted that "prompting for correction" reads upon "flagging a line" for later review. Applicant respectfully disagrees. The system of Shults attempts to automate, to

the extent possible, correlation between the itemized bill and the authorized treatment in the UR agreement. Flagging an item for manual review is not a prompt to correct data in an emergency medical database, but rather represents a failure on the part of the system to correlate a billed item with an authorized treatment, necessitating a manual review of the item and the bill. The Examiner has pointed to no indication that the user would then correct data in an emergency medical database. Rather, it seems that the user would merely make a determination as to whether the item is authorized for payment, or whether payment will be refused.

In addition, Applicant notes that the two references are from significantly different fields. Zak is directed to a handheld system used by medical responders to record medical data at an emergency scene, whereas Shults is directed to a system used by a payor to determine whether itemized medical bills from a treatment provider are to be paid. Applicant respectfully submits that there would be no reason to combine the system of Shults, which is designed to minimize the amount of money paid by a payor to a treatment provider, with the system of Zak, which is designed to record medical information, particularly because the users of the two systems are significantly different. The user of the Zak system is likely to be an emergency medical technician, whereas the user of the Shults system is likely to be an insurance company. Thus, there would be no apparent benefit to either user in combining the two systems.

Thus, Applicant respectfully submits that Claim 1 is patentable over the combination of Zak and Shults, both because neither reference teaches all of the limitations as claimed, and because there would be no reason to combine the teachings of Zak and Shults. As Claims 9 and 12 recite similar limitations, Applicant respectfully submits that they are patentable for the same reasons as Claim 1, in addition to providing separate patentable distinctions. Similarly, Claims 2-8, 10-11, and 13 depend from one of independent claims 1, 9, and 12, and are patentable for at least the reasons discussed above, in addition to providing further patentable distinction.

No Disclaimers or Disavowals

Although the present communication includes alterations to the claim set, and characterizations of claim scope or referenced art, Applicant is not conceding in this application that previously pending claims are not patentable over the cited references. Rather, any alterations or characterizations are being made to facilitate expeditious prosecution of this

application. Applicant reserves the right to pursue at a later date any previously pending or other broader or narrower claims that capture any subject matter supported by the present disclosure, including subject matter found to be specifically disclaimed herein or by any prior prosecution. Accordingly, reviewers of this or any parent, child or related prosecution history shall not reasonably infer that Applicant has made any disclaimers or disavowals of any subject matter supported by the present application.

Co-Pending Applications of Assignee

Applicant wishes to draw the Examiner's attention to the following co-pending applications of the present application's assignee.

Serial Number	Title	Filed
10/007,644	DATA ACCURACY FILTER FOR INTEGRATED EMERGENCY MEDICAL TRANSPORTATION DATABASE SYSTEM	November 6, 2001
10/012,884	INTEGRATED EMERGENCY MEDICAL TRANSPORTATION DATABASE AND VIRTUAL PRIVATE NETWORK SYSTEM	November 6, 2001
11/765,404	BILLING MODIFIER MODULE FOR INTEGRATED EMERGENCY MEDICAL TRANSPORTATION DATABASE SYSTEM	June 19, 2007

Conclusion

For at least the above reasons, Applicant respectfully submits that Claims 1-15 are patentable over the cited references, and respectfully requests the allowance of the same.

Please charge any additional fees, including any fees for additional extension of time, or credit overpayment to Deposit Account No. 11-1410.

Respectfully submitted,

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